

QUERY CONTROL FORM

Application No. 09/965,826
 Examiner-GAU Goodrow-1756

Prepared by NH
 Date 3-3-4
 No. of queries 1

RTIS USE ONLY

Tracking Number 05902397
 Week Date 02/09/04
IFW

JACKET

| | | | |
|----------------------|------------------------|--------------------|----------------|
| a. Serial No. | f. Foreign Priority | k. Print Claim(s) | p. PTO-1449 |
| b. Applicant(s) | g. Disclaimer | l. Print Fig. | q. PTOL-85b |
| c. Continuing Data | h. Microfiche Appendix | m. Searched Column | r. Abstract |
| d. PCT | i. Title | n. PTO-270/328 | s. Sheets/Figs |
| e. Domestic Priority | j. Claims Allowed | o. PTO-892 | t. Other |

SPECIFICATION

a. Page Missing
 b. Text Continuity
 c. Holes through Data
 d. Other Missing Text
 e. Illegible Text
 f. Duplicate Text
 g. Brief Description
 h. Sequence Listing
 i. Appendix
 j. Amendments
 k. Other

MESSAGE

Claim 5, 6, 7 and 10 (originally claims 6, 8, 9 and 12) all depends on A cancelled claim 5. Please Advise And correct claim dependency. (see attached).

CLAIMS

a. Claim(s) Missing
 b. Improper Dependency
 c. Duplicate Numbers
 d. Incorrect Numbering
 e. Index Disagrees
 f. Punctuation
 g. Amendments
 h. Bracketing
 i. Missing Text
 j. Duplicate Text
 k. Other

Thank you

initials NH

RESPONSE

Change dependency of all claims delete 5 insert 1

See supplemental examiner's 16
 Amendment

initials JB